



176

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Art Unit : 1635
Examiner : James Schultz
Serial No. : 10/735,512
Filed : December 12, 2003
Inventor : Salman Al-Mahmood
Title : ANTISENSE OLIGONUCLEOTIDES
: CAPABLE OF INHIBITING THE
: FORMATION OF CAPILLARY
: TUBES BY ENDOTHELIAL CELLS

Customer No.: 035811

Docket No.: 1414-03

Dated: April 24, 2007

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313

Sir:

Certificate of Mailing Under 37 CFR 1.8

For

Postcard
Amendment Transmittal Letter, in duplicate
Response
Information Disclosure Statement
Form PTO-1449 w/copy of five (5) publications

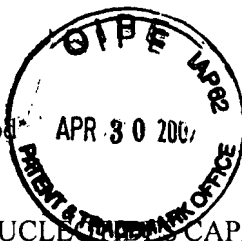
I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date appearing below.

Name of Applicant, Assignee, Applicant's Attorney
or Registered Representative:

DLA Piper US LLP
Customer No. 035811

By: Nancy Nunez

Date: 4/24/07



Attorney Docket No.: 1414-03

In re Application of Salman Al-Mahmoud

Serial No.: 10/735,512

Filed: December 12, 2003

For: ANTISENSE OLIGONUCLEOTIDES CAPABLE OF INHIBITING THE FORMATION OF CAPILLARY TUBES BY ENDOTHELIAL CELLS

Mail Stop Amendment

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

A response to the outstanding official action in the above-identified application is enclosed.

- ☐ Small entity status of this application under 37 CFR §1.9 and §1.27 has been established.
- ☐ This is a Petition for an Extension of Time for the period noted below, as well as for any additional period necessary to render this submission timely.
- ☐ No additional fee is required.

					SMALL ENTITY		OTHER THAN SMALL ENTITY	
TIME EXTENSION PETITION FEE			No month(s)		\$0.00		\$0.00	
Subtract time extension fee previously paid			No month(s)		(\$0.00)		(\$0.00)	
TOTAL EXTENSION FEE DUE					\$0.00		\$0.00	
CLAIM FEE	CLAIM(S) REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	EXTRA CLAIM(S) PRESENT	RATE	ADD'L CLAIM FEE	RATE	ADD'L CLAIM FEE
TOTAL	25	MINUS	27	= 0	x 25=	\$ 0	x 50=	\$
INDEPENDENT	6	MINUS	6	= 0	x 100=	\$ 0	x 200=	\$
<input type="checkbox"/>	FIRST PRESENTATION OF MULTIPLE CLAIM(S)				+ 180=	\$ 0	+ 360=	\$
					TOTAL	\$ 0	TOTAL	\$

- ☐ Please charge Deposit Account No. 50-2719 in the amount of \$_____. A duplicate copy of this sheet is enclosed.
- ☐ A check in the amount of \$_____ is attached.
- ☒ The Commissioner is authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-2719. A duplicate copy of this sheet is enclosed.
- ☒ Any filing fees under 37 CFR §1.16 for the presentation of extra claims.
- ☒ Any patent application processing fees under 37 CFR §1.17.

Respectfully submitted,

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